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# ***OUTPATIENT TREATMENT OPERATIONS:***

**1420**

## **REPORTS & ANNUAL REVIEW PROCESS**

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#### ***QUARTERLY PROGRESS REPORTS***

##### **Overview**

CONREP programs are required to write and submit certain Progress and Dispositional Reports. Some of these reports are generally required by statute and some are required by CONREP policies and procedures. Each type of report is written for a particular consumer and has required submission deadlines associated with it, depending on type of report and the patient's legal classification.

##### **General Description**

Progress reports are required for all CONREP patients every three months from the patient's date of entry into the outpatient program. These reports can be concise, but need to provide very specific information regarding the patient's overall status in the community. The specific report contents are described on the following pages.

All reports or other legal communication regarding CONREP patients must correctly identify the patient with the patient's name and the court or CDC case number. All reports shall be signed/countersigned by the Community Program Director.

There is also an annual review or renewal process and report for each CONREP patient which incorporates information from the Quarterly Progress Reports. This annual process is described in detail later in this section.

##### **Monitoring Report Production**

In order to ensure both the timeliness and adequacy of those reports, CONREP programs shall have a procedure in place to monitor report production including the meeting of timelines and review by the Community Program Director. This procedure is to be included in the program's Policy and Procedure Manual and specify who is responsible for each segment of the review process.

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#### ***QUARTERLY PROGRESS REPORTS***

##### **Submission of Reports**

Quarterly Progress Reports relating to judicially committed patients are to be addressed to the committing court or the Presiding Judge of the Superior Court. Copies of these reports should be sent to:

- \* Prosecuting attorney;
- \* Defense attorney;
- \* Community Program Director of the county of commitment, if the patient was committed by another county; and
- \* Identified parole agent for MDO patients.

##### **Report Contents**

##### **Legal Information**

The Quarterly Progress Report will include a brief statement containing, at minimum, the patient's legal status, current commitment to the Program, and involvement in any prior treatment program(s). Provide the following specific information:

- \* Type of commitment:
  1. PC 1026 (NGI);
  2. PC 1370 (IST);
  3. WIC 6316 (MDSO);
  4. WIC 6604 (SOCP)
  5. WIC 702.3 (MNGI);
  6. PC 2962 or 2964 (MDOPAR); or
  7. PC 2972 (MDOCIV).
- \* Nature of the offense:
  1. Approximate date;
  2. Legal charge(s);
  3. Use of a weapon;
  4. Victim(s) age and sex;
  5. Relationship to victim; and
  6. Use of alcohol/drugs;
- \* Previous commitment to an inpatient treatment facility or other outpatient treatment program:
  1. Date of commitment; and
  2. Name of facility.



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#### ***QUARTERLY PROGRESS REPORTS***

##### **Report Contents (cont.)**

##### **Legal Information (cont.)**

- \* Date of court or BPT order approving placement and/or transfer to present program;
- \* Date of admission to present program for treatment; and
- \* Time remaining on term of commitment or parole (for MDOs).

##### **Living Arrangement**

Provide specific information regarding the patient's current living arrangement, including:

- \* Current Residence;
- \* Type of facility:
  1. Residential care;
  2. Family home;
  3. Drug/alcohol rehabilitation facility; or
  4. Independent living arrangement;
- \* Relationship, if any, to others in residence;
- \* Status of the arrangement.

##### **Employment/Training**

Provide specific information regarding the patient's current employment and/or training status, including:

- \* Current employment/training program;
  - \* Status of employment/training:
    1. Full/part time; and
    2. Temporary/permanent;
- \* Type of income and amount:
  1. Salary;
  2. SSI (Supplemental Security Income);
  3. SSD (Social Security Disability);
  4. VA benefits; and/or
  5. Other source(s) of income.

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#### ***QUARTERLY PROGRESS REPORTS***

##### **Report Contents (cont.)**

###### **Support Systems**

Provide general information regarding the availability of support systems to the person including, but not limited to:

- \* Family;
- \* Friends;
- \* Alcoholics Anonymous;
- \* Narcotics Anonymous;
- \* Parents United; and/or
- \* Other support groups.

###### **Avocational Interests**

Provide general information regarding the patient's involvement, if any, in leisure, recreational, and/or social activities such as:

- \* Hobbies;
- \* Sports;
- \* Special interests; and/or
- \* Church, voluntary associations.

###### **Treatment Program**

Provide specific information regarding the patient's current treatment plan and his/her involvement in the therapeutic process, including:

- \* Treating facility:
  1. Name, address, phone number; and
  2. Name, phone number of therapist(s);
- \* Treatment modalities:
  1. Individual;
  2. Group;
  3. Family; and/or
  4. Day treatment/socialization;
- \* Diagnosis/prognosis;
- \* Frequency of contact;

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### ***QUARTERLY PROGRESS REPORTS***

#### **Report Contents (cont.)**

##### **Treatment Program (cont.)**

- \* Level of participation in the treatment process;
- \* Medication:
  - 1. Type of medication;
  - 2. Effect; and/or
  - 3. Compliance;
- \* Frequency and results of lab screenings for:
  - 1. Drug and alcohol abuse; and
  - 2. Medication compliance (if applicable);
- \* Any changes in the treatment plan;
- \* Any episodes of decompensation; and
- \* Brief inpatient treatment which did not affect the outpatient status.

##### **Compliance with Outpatient Contract**

Provide a brief statement regarding the patient's overall compliance with the terms and conditions of the outpatient contract.

##### **Legal Contacts**

Also indicate whether the patient has had any contact with the legal authorities for any reason, including:

- \* PC 290 registration as a Sex Offender;
- \* Vehicle code violations;
- \* Arrests/detentions; and/or
- \* Misdemeanor offense which may not affect the outpatient status.

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#### ***ANNUAL REVIEW REPORT***

##### **Review Requirements**

Each court or Board of Prison Terms (BPT) order for outpatient treatment and supervision services is for one year. In order to renew the commitment, an Annual Case Review is required for all patients committed judicially [PC 1606] or by the BPT to outpatient mental health treatment. An integral part of this review process is the Annual Review Report which the CONREP program is required to produce for each patient.

The Annual Case Review serves as the core service assessment requirement. Other patient related documents are to be updated at the time of the annual review. For further information regarding these and other Annual Case Review procedures, please refer to **Section 1610: ASSESSMENT SERVICES, Annual Case Review**.

##### **MDO Renewal Process**

PC Section 3001 requires the BPT to conduct an annual review of each parolee, including those who are MDO patients. At this review, the parolee may be retained on parole with good cause. The Board will concurrently decide whether or not to continue the special condition for mental health treatment under PC 2962.

This process is initiated each year when the CDC Parole and Community Services Division Parole Agent of record submits a report to the BPT recommending retention or discharge of the parolee/patient.

The BPT annual review is scheduled according to the CDC determined Discharge Review Date (DRD). The DRD is based on the parole release date (the date the parolee was released from prison or transferred from PC 2684 to MDO status). It is not related to the date of transfer to outpatient status. For more information, refer to **Annual MDO Renewal Evaluation: PC 2960** later in this section.

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#### ***ANNUAL REVIEW REPORT***

##### **Format**

The Annual Review Report should follow the same format as the Quarterly Progress Reports. It should be a summary of the previous reports with an assessment of progress or changes throughout the year and the patient's overall status in the community.

The report must correctly identify the patient's name and the court case or CDC file number. All annual reviews shall be signed/countersigned by the Community Program Director.

In addition, each annual review contains a recommendation to the court or BPT for disposition. The recommendation is specific to the legal category by which the patient was committed to outpatient treatment and should include a specific justification for the recommendation.

##### **Submission of Reports**

##### **Judicially Committed Patients**

The Annual Review Report must be submitted prior to the expiration date of the court order for outpatient treatment and supervision services. Reports for judicially committed patients are to be addressed to the committing judge or the presiding judge of the superior court. Copies of the report should be sent to:

- \* Prosecuting attorney;
- \* Defense attorney; and
- \* Community Program Director of the county of commitment, if the patient was committed by another county.

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## ***OUTPATIENT TREATMENT OPERATIONS:***

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#### ***ANNUAL REVIEW REPORT***

##### **Submission of Reports (cont.)**

###### **MDO Parolee/Patients**

The Annual Review Report is to be forwarded to the parole agent of record in sufficient advance of the Discharge Review Date (DRD). CONREP programs need to obtain this date from the CDC parole agent of record, schedule a case review and submit the annual report accordingly.

The Annual Review Report for MDO parolee/patients must include the completion and submission of form **MH 1790, Annual Parole Condition Renewal Evaluation** (Rev. 1/90). The criteria by which the patient is to be evaluated is discussed later in this section under **Annual MDO Renewal Evaluation: PC 2960**. The CDC parole agent will distribute copies of the report to other relevant parties.

##### **Maximum Term of Commitment**

###### **Definition**

A judicially committed patient may not be committed to inpatient treatment for a period of time longer than the maximum term possible for the crime for which the patient has been adjudicated. This is known as the "maximum term of commitment." When a recommendation to renew outpatient treatment is made to the court, consideration must be given to the time left on the patient's commitment.

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#### ***ANNUAL REVIEW REPORT***

##### **Maximum Term of Commitment (cont.)**

###### **IST Patients**

A person committed as an Incompetent to Stand Trial (IST) patient may not be committed for more than three years or the maximum term of the charge, whichever is shorter [PC1370(c)(1)].

For a person who is declared Incompetent to Stand Trial, time spent in both inpatient and outpatient treatment is credited towards the maximum term of commitment [PC 1375.5].

###### **MDSO, NGI & MDO Civil Patients**

For Mentally Disordered Sex Offenders (MDSO), persons declared Not Guilty by Reason of Insanity (NGI) and Mentally Disordered Offender Civil Commitments (MDO-CIV), only time spent in a locked facility is credited toward the person's maximum term of commitment [PC 1600.5].

It is the responsibility of the Community Program Director to inform the court of any changes in the patient's maximum term of commitment as a result of any locked inpatient stays during the prior year.

###### **MDO Parolee/Patients**

The maximum term of commitment does not apply to MDO parolee/patients. There is a maximum period of parole (usually three years, see PC 3000). However, upon the expiration of parole, involuntary mental health treatment may be extended on an annual basis through a civil commitment process (PC 2970).

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# ***OUTPATIENT TREATMENT OPERATIONS:***

## **REPORTS & ANNUAL REVIEW PROCESS**

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### ***ANNUAL REVIEW REPORT***

#### **Maximum Term of Commitment (cont.)**

##### **SOCP Commitments**

The term of the SOCP commitment is two years. Pursuant to WIC 6608(k), time spent in a conditional release program does not count toward a term of commitment unless the person is confined in a locked facility by the conditional release program, in which case the time spent in a locked facility shall count toward the term of commitment.

#### **General Content Categories**

Outlined below are the major content categories of the Quarterly Progress Report including any additional material required.

##### **Legal Information**

Same as Quarterly Progress Report.

##### **Living Arrangement**

Additional Information:

- \* Frequency of moves in past year;
- \* Stability and adequacy of living arrangement; and
- \* Future plans to relocate, if any.

##### **Employment/Training**

Additional Information:

- \* Stability and adequacy of employment and/or training program;
- \* Ability to complete assigned job tasks and/or training program responsibilities; and
- \* Future career plans and goals.

##### **Support Systems**

Same as Quarterly Progress Report.

##### **Avocational Activities**

Same as Quarterly Progress Report.

##### **Treatment Program**

Provide a summary of the patient's overall treatment progress by addressing the same program aspects identified in Quarterly Progress Report.

##### **Compliance with Outpatient Contract**

Same as Quarterly Progress Report.



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### ***ANNUAL REVIEW REPORT***

#### **Annual Review Options**

Pursuant to PC 1606, before the end of the period of outpatient status approved by the court, the Community Program Director shall furnish a report and recommendation regarding the patient to the court. The court has three options:

- \* Discharge the person from the commitment under the appropriate provisions of the law;
- \* Order the person confined to a treatment facility; or
- \* Renew its approval of outpatient status.

#### **Recommendations**

##### **MDO Parolees**

For an MDO parolee/patient, the recommendation is in the form of an evaluation as to whether the patient continues to meet the MDO criteria.

##### **SOCP Commitment**

For a SOCP commitment patient, the annual review recommendation is in the form of an evaluation as to whether or not the person's diagnosed mental disorder has so changed that he/she is not a danger to the health and safety of others in that it is not likely that he or she will engage in sexually violent criminal behavior, if discharged [WIC 6608(d)]

##### **Specific Factors**

Each Annual Review Report must contain specific information to justify the recommendation. Factors to consider in determining renewal recommendations are discussed in detail by legal category in the following pages.

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#### ***ANNUAL REVIEW RECOMMENDATIONS: PC 1370 (IST)***

##### **Renew Outpatient Status**

When the recommendation is to renew outpatient status for another year, provide specific information to the court to justify the assessment that the patient remains Incompetent to Stand Trial. Factors to be addressed include:

- \* Is in need of and can benefit from further treatment;
- \* Does not pose a danger to self and others while involved in a program of supervision and treatment in the community;
- \* Remains unable to understand the nature of the criminal proceedings; and
- \* Remains unable to assist his/her attorney in the conduct of a defense in a rational manner.

##### **Terminate Outpatient Status**

##### **Restored to Competency**

When a program determines that the patient is now competent to stand trial and recommends that the court terminate outpatient treatment status and restore the person to competency, provide specific information to the court to justify the recommendation. Factors to be addressed include:

- \* Is able to assist and cooperate with his/her attorney in the conduct of a defense;
- \* Is able to understand the court process; and
- \* Is aware of the role and responsibilities of the various court officials.

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#### ***ANNUAL REVIEW RECOMMENDATIONS: PC 1370 (IST)***

##### **Terminate Outpatient Status (cont.)**

Competency Not Likely  
to be Restored

A recommendation to terminate outpatient status may also be made when the program determines that the patient is not likely to become competent in the foreseeable future. In this case, a recommendation for a "Murphy Conservatorship" [WIC 5008(h)(B)] may be appropriate.

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***OUTPATIENT TREATMENT OPERATIONS:*****REPORTS & ANNUAL REVIEW PROCESS**

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***ANNUAL REVIEW RECOMMENDATIONS: PC 1026 (NGI)*****Renew Outpatient Status**

When the recommendation is to renew outpatient status for another year, provide specific information to the court to justify the assessment that the patient's sanity has not been restored. Factors to be addressed include:

- \* Is in need of and can benefit from further treatment;
- \* Is motivated to benefit from treatment; and
- \* May pose a danger to self or others unless treated and supervised in the community.

**Terminate Outpatient Status**

When the recommendation is to terminate outpatient status, provide specific information to the court to justify the assessment that the patient's sanity has been restored. Factors to be addressed include:

- \* Has benefited from treatment;
- \* Is not in need of supervision;
- \* Does not now pose a danger to self or others; and
- \* Is not now insane.

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#### ***ANNUAL REVIEW RECOMMENDATIONS: WIC 6316 (MDSO)***

##### **Renew Outpatient Status**

When the recommendation is to renew outpatient status for another year, provide specific information to the court to justify the assessment that the patient remains a mentally disordered sex offender. Factors to be addressed include:

- \* May pose a danger to the health and safety of others unless supervised and treated in the community;
- \* Is in need of and can benefit from further treatment; and
- \* Is motivated to benefit from treatment.

##### **Terminate Outpatient Status**

When a MDSO patient is recommended for termination of outpatient status, he/she is still subject to further legal proceedings. Provide specific information to the court to justify the following types of terminations.

- \* Termination based on the assessment that the patient is not now a mentally disordered sex offender [WIC 6325(a)]. Factors to be addressed include:
  1. Has benefited from treatment;
  2. Is not in need of supervision; and
  3. Does not now pose a danger to the health and safety of others;
- \* Termination of outpatient status and reinstitution of criminal proceedings based on the assessment that the patient is not benefiting from treatment [WIC 6325(b)]. Factors to be addressed include:
  1. Remains in need of supervision; and
  2. Remains a danger to the health and safety of others.

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#### ***ANNUAL MDO RENEWAL EVALUATION: PC 2960***

##### **Purpose**

When the BPT considers the annual parole renewal for an MDO parolee, it must also address the renewal of the patient's MDO status. Rather than making specific recommendations to renew or terminate outpatient status, the purpose of this evaluation is to assess and report whether the patient continues to meet the MDO criteria.

The MDO Annual Review Report must include the completion and submission of form, **MH 1790, Annual Parole Condition Renewal Evaluation**. The three specific criteria identified in PC 2966(c) and defined in PC 2962(a) are discussed below must be addressed in the evaluation.

##### **Criteria [PC 2966(c)]**

##### **Severe Mental Disorder**

The first criterion is to determine if the parolee/patient continues to have a severe mental disorder which is defined as: "An illness or disease or condition which substantially impairs the person's thought, perception of reality, emotional process, or judgment; or which grossly impairs behavior; or that demonstrates evidence of an acute brain syndrome for which prompt remission in the absence of treatment is unlikely."

Documentary evidence of this severe mental disorder must be provided.

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#### ***ANNUAL MDO RENEWAL EVALUATION: PC 2960***

##### **Criteria [PC 2966(c)] (cont.)**

###### **Determination of Remission**

The renewal evaluation must determine whether the parolee/patient is "not in remission or cannot be kept in remission without treatment". Either of these two criteria may apply:

- \* "Not in Remission" —  
Remission means a clinical finding that the "overt signs and symptoms of the severe mental disorder are controlled either by psychotropic medication or psychosocial support". If the patient is "not in remission", a narrative explanation of this clinical assessment should be provided; or
- \* "Cannot be kept in remission without treatment" —  
This is determined by documenting whether, during the prior year, the patient has been in remission and exhibited one or more of these behaviors:
  1. Was physically violent;
  2. Made a serious threat of substantial physical harm;
  3. Intentionally caused property damage; and/or
  4. Did not voluntarily follow his/her treatment plan.

###### **Danger of Physical Harm**

The third criteria is to determine whether, by reason of the severe mental disorder, the parolee represents a substantial danger of physical harm to others. In assessing this criteria, staff should refer to the discussion in the Forensic Services Branch **Mentally Disordered Offender Evaluator Handbook (Revised 1990)**.

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## ***OUTPATIENT TREATMENT OPERATIONS:***

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#### ***ANNUAL REVIEW RECOMMENDATIONS: PC 2972 (MDO CIVIL)***

##### **Annual Outpatient Status Review**

###### **Review Report**

The outpatient status of MDO Civilly Committed Patients (PC2972) shall be reviewed annually prior to the anniversary date of the original outpatient commitment. The Community Program Director shall prepare an Annual Review Report at least 30 days prior to the anniversary date of the outpatient commitment. Copies of the report shall be sent to:

- \* Prosecuting attorney;
- \* Defense attorney; and
- \* Community Program Director of the county of commitment, if applicable.

###### **Key Assessment Factors**

When the recommendation is to renew outpatient status for another year, the court must be provided specific information to justify the assessment that the patient is not or cannot be kept in remission without treatment. Factors to be addressed include whether the patient:

- \* Is in need of and can benefit from further treatment;
- \* Is motivated to benefit from treatment; and
- \* May pose a danger to self or others unless treated and supervised in the community.

###### **Recommendation Options**

The recommendation made by the Community Program Director shall be discharge from commitment, continued outpatient treatment, or confinement in a state hospital or other approved treatment facility.



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## ***OUTPATIENT TREATMENT OPERATIONS:***

**1420**

### **REPORTS & ANNUAL REVIEW PROCESS**

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#### ***ANNUAL REVIEW RECOMMENDATIONS: PC 2972 (MDO CIVIL)***

##### **MDO Civil Commitment Renewals**

###### **Statutory Change**

Statutory changes effective January 1, 2001 have eliminated the need for outpatient programs to file for an extension of the MDO Civil Commitment annually.

###### **Transition Period Requirement**

However, the Community Program Director should evaluate all MDO Civil Commitments whose Civil Commitment would have ended by April 30, 2001 but for the change in the law. If they continue to meet the criteria for the Civil Commitment, then the Community Program Director should request for an extension of the Civil Commitment with the District Attorney's Office in the county of treatment. This will allow the District Attorney's Office the ability to determine how or whether to proceed with this petition to the appropriate court.

###### **Filing Extensions Concurrent with Revocation**

When a CONREP program requests a revocation of a Civilly Committed MDO with 120 days or less remaining on the civil commitment, the Community Program Director should file a request for an extension of the Civil Commitment with the District Attorney's Office in the county of commitment.

The Community Program Director should complete and submit form **MH 7024, Renewal Evaluation of Mentally Disordered Offender Civil Commitment**. The form and the recommendation for extension of the Civil Commitment should be sent to the District Attorney's office in sufficient time for the petition to be filed in the court in question. Concurrently, the revocation request should be sent to the court.

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## ***OUTPATIENT TREATMENT OPERATIONS:***

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### **REPORTS & ANNUAL REVIEW PROCESS**

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#### ***ANNUAL REVIEW RECOMMENDATIONS: PC 2972 (MDO CIVIL)***

##### **Specific Criteria**

The three specific criteria which are identified in PC 2972(e) and defined in PC 2962(a) must be addressed in the MH 7024, Renewal Evaluation of Mentally Disordered Offender Civil Commitment report. These criteria are:

- \* Presence of severe mental disorder
- \* Determination of remission; and
- \* Danger of physical harm;

These criteria are discussed in the **Annual MDO Renewal Evaluation: PC 2960** (see previous pages).

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## ***OUTPATIENT TREATMENT OPERATIONS:***

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### **REPORTS & ANNUAL REVIEW PROCESS**

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#### ***ANNUAL REVIEW RECOMMENDATIONS: WIC 6608 (SOCP)***

##### **Renew Outpatient Status**

When the recommendation is to renew outpatient status for another year, the evaluation report should provide specific information to the court to justify the assessment that the patient remains a sexually violent predator. Factors to be addressed include whether:

- \* The person's diagnosed mental disorder remains such that he or she is a danger to the health and safety of others; and
- \* The person is likely to engage in sexually violent criminal behavior if discharged [WIC 6605(d)].

##### **Burden of Proof**

The patient has the right to request a hearing on the matter of renewal. The burden of proof is on the state to prove the above criteria beyond a reasonable doubt.

##### **Outcomes**

If the court or jury rules for the committed person, he or she shall be unconditionally released and unconditionally discharged.

If the court or jury rules against the committed person at the hearing the term of commitment of the person shall run for a period of two more years from the date of this ruling [WIC 6605(d)].

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## ***OUTPATIENT TREATMENT OPERATIONS:***

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### **REPORTS & ANNUAL REVIEW PROCESS**

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#### ***ANNUAL REVIEW HEARINGS***

##### **Judicially Committed Patients**

On receiving the Annual Review Report, the court will calendar a hearing and will notify the Community Program Director of the hearing date. The Community Program Director or the primary therapist shall inform the patient of the hearing date and of the patient's need to appear in court for the hearing. For PC 1370 patients, the court also conducts a hearing after 18 months of treatment and supervision [PC 1370(b)(2)].

##### **MDO Parolee/Patients**

##### **Board of Prison Terms (BPT) Hearings**

If the BPT decides to retain an MDO patient on parole and reaffirms the condition of parole requiring treatment, then the parolee has a right to a hearing. The parolee is notified of the decision and of his/her right to the hearing before the BPT.

##### **DMH Involvement**

If the parolee/patient decides to request a hearing before the BPT on the MDO special condition, it is the responsibility of DMH to demonstrate that the patient continues to meet the criteria of the law. The burden of proof in such a hearing lies with DMH.

##### **Court Appeal**

The parolee/patient may appeal the finding of the BPT hearing regarding the continuation of the special condition to the Superior Court. This Superior Court appeal addresses the presence of a severe mental disorder, whether the parolee still meets the MDO "remission" criterion and represents a substantial danger of physical harm to others [PC 2966(c)]. MDO placement issues are not addressed in this appeal.

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## ***OUTPATIENT TREATMENT OPERATIONS:***

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### **REPORTS & ANNUAL REVIEW PROCESS**

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#### ***ANNUAL REVIEW HEARINGS***

##### **MDO Parolee/Patients (cont.)**

###### **Outcomes**

The court or BPT will determine if it will accept or deny the recommendation of the CONREP program and will render its decision by issuing a court or Board order. A copy of this order should be obtained and filed in the patient's chart. The patient shall remain on outpatient status until the BPT or court renders its decision.

###### **Dispositions**

More detailed descriptions of annual review outcomes for all commitment types is provided under **Annual Review Dispositions** on the following pages.

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## ***OUTPATIENT TREATMENT OPERATIONS:***

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### **REPORTS & ANNUAL REVIEW PROCESS**

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#### ***ANNUAL REVIEW DISPOSITIONS: PC 1370 (IST)***

##### **Competence Not Restored**

The court may determine that the patient's competence has not been restored and may order the following:

- \* Renew outpatient status for another year.  
The patient must remain involved in outpatient treatment and supervision services until the court terminates the commitment;
- \* Revoke outpatient status and place the patient in a state hospital or other public/private inpatient treatment facility if the court determines that the patient is in need of treatment in a secure environment; or
- \* Initiation of "Murphy Conservatorship" proceedings for those determined to be gravely disabled per WIC 5008(h)(B).

##### **Competence Restored**

The court may determine that the patient's competence has been restored and that he/she is now able to proceed with the criminal process. The court will terminate the commitment for treatment and will resume criminal proceedings.

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## ***OUTPATIENT TREATMENT OPERATIONS:***

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### **REPORTS & ANNUAL REVIEW PROCESS**

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#### ***ANNUAL REVIEW DISPOSITIONS: PC 1026 (NGI)***

##### **Sanity Not Restored**

The court may determine that the patient's sanity has not been restored and may order the following:

- \* Renew outpatient status for another year.  
The patient must remain involved in outpatient treatment and supervision services until the court terminates the commitment; or
- \* Revoke outpatient treatment and supervision services and place the patient in a state hospital or other public/private inpatient treatment facility if the court determines that the patient is in need of treatment in a secure environment.

##### **Sanity Restored**

After one year on outpatient status, the court may determine that the patient's sanity has been restored and that he/she no longer poses a danger to the health and safety of others, including himself or herself [PC 1026.2(e)].

The court will terminate the commitment for treatment and discharge the patient from any further legal proceedings on this matter.

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## ***OUTPATIENT TREATMENT OPERATIONS:***

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### **REPORTS & ANNUAL REVIEW PROCESS**

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#### ***ANNUAL REVIEW DISPOSITION: WIC 6316 (MDSO)***

##### **MDSO Status Not Terminated**

The court may determine that the patient remains an MDSO and may order the following:

- \* Renew outpatient status for another year.  
The patient must remain involved in outpatient treatment and supervision services until the court terminates the commitment; or
- \* Revoke outpatient status and place the patient in a state hospital or public/private inpatient treatment facility if the court determines that the patient is in need of treatment in a secure environment [WIC 6325(b)].

##### **MDSO Status Terminated**

The court may determine that the patient is not in need of or would not benefit from further treatment and terminate the MDSO commitment. Criminal proceedings are then reinstituted and the court may order the following:

- \* Terminate all criminal proceedings and release the patient from the court's jurisdiction;
- \* Place the patient on probation; or
- \* Commit the patient to jail or to prison to serve the remaining time on his/her sentence.



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## ***OUTPATIENT TREATMENT OPERATIONS:***

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### **REPORTS & ANNUAL REVIEW PROCESS**

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#### ***ANNUAL REVIEW DISPOSITION: PC 2960 (MDO)***

##### **Continued Parole with MDO Special Condition**

The Board of Prison Terms (BPT) may determine that the parolee/patient is to remain on parole and continues to meet the MDO criteria for DMH mental health treatment as a condition of parole.

##### **Continued Parole with MDO Special Condition Terminated**

The BPT may determine that the parolee/patient is to remain on parole, but no longer meets the MDO criteria for DMH mental health treatment as a condition of that parole. In this case, the patient would be discharged from CONREP.

##### **Parole Terminated**

The BPT may terminate the parole. If the patient still meets the MDO criteria, DMH may petition the court for a continuation of treatment through a civil commitment process [PC 2970]. (Refer to manual **Section 1440: MDO CIVIL COMMITMENT PROCESS** for further information.)

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## ***OUTPATIENT TREATMENT OPERATIONS:***

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### **REPORTS & ANNUAL REVIEW PROCESS**

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#### ***ANNUAL REVIEW DISPOSITION: WIC 6604 (SOCP)***

##### **Court Ordered Unconditional Release**

At the end of one year on outpatient status, the court shall hold a hearing to determine if the person should be unconditionally released from commitment.

The standard for determining unconditional release is that by reason of a diagnosed mental disorder, the patient is not a danger to the health and safety of to others in that it is not likely that he or she will engage in sexually violent criminal behavior [WIC 6608(d)].

If the court rules for the patient, he or she will be unconditionally released and discharged pursuant to WIC 6605(e).

##### **DMH Recommendation: No Longer an SVP**

PC 1607 does not contain a provision for the Community Program Director to directly recommend to the court that a person is no longer an SVP. If at any time after one year on outpatient treatment, the Community Program Director is of the opinion that the person may no longer be an SVP, the process for DMH initiated **Recommendation for Discharge of Sex Offender Commitment Program Patient (MH 7021)** should be followed. Please refer to manual **Section 1430: SEPARATION PROCESS, Discharge: WIC 6604 (SOCP)**.

The process for submission of such a recommendation to the Director of the Department of Mental Health is outlined in manual **Section 1250: SEX OFFENDER COMMITMENT PROGRAM, Discharge from CONREP**.

The standard of whether one is no longer a Sexually Violent Predator is that the patient's diagnosed mental disorder has improved to the extent that the patient is not likely to commit acts of predatory sexual violence [PC 6605(f)].

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## ***OUTPATIENT TREATMENT OPERATIONS:***

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### **REPORTS & ANNUAL REVIEW PROCESS**

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#### ***ANNUAL REVIEW DISPOSITION: WIC 6604 (SOCP)***

##### **Court Denies Application**

The court may determine that the patient remains a sexually violent predator and may order either of the following:

- \* Renew outpatient status for another year; or
- \* Revoke outpatient status and place the patient in a state hospital, if the court determines that the patient is in need of treatment in a secure environment.

If the court denies the patient's application for unconditional discharge, the person may not file a new application until one year has elapsed from the date of denial. The patient must remain involved in outpatient treatment and supervision services until the court terminates the commitment.